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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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EXAMINER

TOMASZEWSKI, MICHAEL

ART UNIT	PAPER NUMBER
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3626

DATE MAILED: 07/06/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

Office Action Summary	Application No. 09/854,039	Applicant(s) BLASINGAME ET AL.	
	Examiner Mike Tomaszewski	Art Unit 3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 10 May 2001.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-32 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-32 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☒ The drawing(s) filed on 10 August 2001 is/are: a) ☒ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
2. ☐ Certified copies of the priority documents have been received in Application No. _____.
3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
- * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input checked="" type="checkbox"/> Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application (PTO-152) |
| Paper No(s)/Mail Date <u>17 September 2001</u> . | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Notice To Applicant

1. This communication is in response to the application filed on 10 May 2001.
Claims 1-32 are pending. The IDS statements filed on 17 September 2001, 16 October 2001, and 26 August 2002 have been entered and considered.

Claim Rejections - 35 USC § 102

2. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(b) the invention was patented or described in a printed publication in this or a foreign country or in public use or on sale in this country, more than one year prior to the date of application for patent in the United States.

3. Claims 1-6, 8-13, 16, and 24-32 are rejected under 35 U.S.C. 102(b) as being anticipated by Joao (6,283,761; hereinafter Joao).

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(A) As per claim 1, Joao discloses a method for creating a medical chart regarding a patient's medical condition for which an appointment has been scheduled with a physician, comprising:

- (i) enabling said patient to access a server site, and enabling said condition at said server site (Joao: col. 13, lines 30; col. 29, lines 48-54; col. 32, lines 47-52; Fig. 1);
- (ii) connecting said patient to said server site (Joao: col. 13, lines 29-38; col. 15, lines 6-17; Fig. 1);
- (iii) interactively interviewing said patient by said server site regarding said enabled condition, and storing information from said patient regarding said condition in patient files at said server site (Joao: col. 19, lines 54-64) (Note that Examiner considers questionnaires to be a form of interactive interviewing.);
- (iv) responsive to said interview, electronically generating, by said server site, pre-visit information that includes an editable preliminary chart note including information relating to said patient's condition (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-8) and
- (v) transmitting said preliminary chart note to said physician (Joao: col. 12, lines 58-67 and col. 13, lines 1-7; col. 25, lines 54-58; Fig. 1).

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(B) As per claim 2, Joao discloses the method of claim 1 further comprising, after examining said patient by said physician:

- (i) completing said patient's chart note by said physician responsive to said examination (Joao: col. 19, lines 65-67 and col. 20, lines 1-8); and
- (ii) storing said completed chart note at said server site (Joao: col. 19, lines 65-67).

(C) As per claim 3, Joao discloses the method of claim 1 further comprising electronically generating pre-visit information responsive to said interview that includes a pre-visit physician report including expert medical information relating to said patient's condition, and transmitting said report to said physician (Joao: col. 11, lines 3-13; col. 17, lines 25-60; col. 20, lines 21-27; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1).

(D) As per claim 4, Joao discloses the method of claim 3 wherein said pre-visit physician report includes treatment considerations and transmitting said pre-visit physician report to said physician; Joao specifically discloses the inclusion of treatment considerations (Joao: col. 5, lines 28-32; col. 17, lines 25-60; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1).

(E) As per claim 5, Joao discloses the method of claim 1 further comprising electronically generating pre-visit information that includes a pre-visit patient summary

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responsive to said interview including information relating to said patient's condition, and transmitting said pre-visit patient summary to said patient (Joao: col. 4, lines 30-33; col. 11, lines 3-13; col. 20, lines 34-39; col. 24, lines 49-62; Fig. 1).

(F) As per claim 6, Joao discloses the method of claim 5 wherein said step of electronically generating said pre-visit patient summary further comprises electronically generating key questions relating to said condition, and transmitting said key questions to said patient (Joao: col. 11, lines 3-13; col. 14, lines 13-21; col. 19, lines 54-64; col. 25, lines 25-38; Fig. 1) (Note that Examiner considers "information of interest" and "other medical information needed to make a diagnosis" to include key questions pertaining to the patient's condition.).

(G) As per claim 8, Joao discloses the method of claim 1 further comprising, after examining said patient by said physician, generating a post-visit report, and transmitting said post-visit report to said patient (Joao: col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1).

(H) Claim 9 repeats the same limitations as claims 3, 5 and 7, and is therefore rejected for the same reasons given for those claims.

(I) Claim 10 repeats the same limitations of claim 4, and is therefore rejected for the same reason given for that claim.

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(J) As per claim 11, Joao discloses a method for creating medical chart regarding an office visit for a specific condition of a patient, comprising:

- (i) providing a server site connected to an electronic communication network, said server site including storage of patient files for a plurality of patients including said patient (Joao: col. 8, lines 27-34; col. 13, lines 29-38; col. 15, lines 6-17; Fig. 1);
- (ii) connecting said patient to said sever site using said electronic communication network (Joao: col. 13, lines 29-38; col. 15, lines 6-17; Fig. 1);
- (iii) interviewing said patient by said patient regarding said specific condition in said patient's files at said server site (Joao: col. 19, lines 54-64; Note that Examiner considers questionnaires to be a form of interactive interviewing.);
- (iv) electronically generating, by said server site, pre-visit information that includes a pre-visit patient summary and a preliminary chart note, and transmitting said pre-visit patient summary to said patient (Joao: col. 4, lines 30-33; col. 11, lines 3-13; col. 20, lines 34-39; col. 24, lines 49-62; Fig. 1) and said preliminary chart note to said physician (Joao: col. 12, lines 58-67 and col. 13, lines 1-7; col. 25, lines 54-58; Fig. 1);

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- (v) examining said patient by said physician (Joao: col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1);
 - (vi) completing said patient's chart note by said physician responsive to said examination (Joao: col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1); and
 - (vii) storing said completed chart note at said server site (Joao: col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1).
- (K) As per claim 12, Joao discloses the method of claim 11, further comprising:
- (i) selecting, by said physician, condition-specific educational material to be provided to said patient (Joao: col. 17, lines 25-60; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1); and
 - (ii) responsive to said completed chart note and said selected material, electronically generating a post-visit report for said patient (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1).
- (L) Claim 13 repeats the same limitations of claims 6 and 7, and is therefore rejected for the same reasons given for those claims.
- (M) As per claim 16, Joao discloses the method of claim 11, further comprising:

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- (i) electronically storing a group of patient files without patient identifiers such that said patient files avoid disclosing the identity of the patients associated with said files (Joao: col. 5, lines 60-64; col. 7, lines 16-18); and
- (ii) performing medical studies utilizing said group of patient files (Joao: col. 19, lines 21-53; Note that Examiner considers statistical calculations to be a form of medical study.).

(N) Claim 24 differs from method claim 1 by reciting hardware elements, namely a communication link, an electronic communication network, a plurality of databases stored in computer-readable form, and a plurality of computer programs. As per these elements, Joao discloses:

- (i) a communication link (Joao: Fig. 1);
- (ii) an electronic communication network (Joao: col. 2, lines 63-67);
- (iii) a plurality of databases stored in computer-readable form (Joao: col. 4, lines 11-25); and
- (iv) a plurality of computer programs (Joao: col. 7, lines 24-42).

(O) Claim 25 from method claim 7 by reciting hardware elements, namely a database and a system. As per this element Joao discloses a database (Joao: col. 4, lines 11-25).

(P) As per claim 26, Joao discloses the system of claim 24, further comprising means for protecting the security of all transmissions to and from said server site over said electronic communication network, including encrypting said transmissions, and further including means for protecting the privacy of said patient's file on said server site (Joao: col. 4, lines 6-10; col. 7, lines 16-23; col. 19, lines 8-11).

(Q) As per claim 27, Joao discloses the system of claim 24, further comprising:

- (i) a system for said physician to complete said patient's chart note, and transmitting said completed chart note to said server site for storage in said patient's file (Joao: col. 11, lines 3-6; col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1);
- (ii) a system for electronically selecting condition-specific educational material to be provided to said patient, and transmitting said selected material to said server site for storage in said patient's file (Joao: col. 11, lines 3-13; col. 17, lines 25-60; col. 20, lines 21-27; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1); and
- (iii) a system, responsive to said completed chart note and said selected material, that electronically generates a post-visit report for said patient (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1).

(R) As per claim 28, Joao discloses the system of claim 24, further comprising a system for allowing said patient to update said patient's file (Joao: col. 19, lines 65-67; Fig. 1).

(S) As per claim 29, Joao discloses the system of claim 24, further comprising a system for allowing a physician to view said patient's file only if said physician has been pre-authorized by said patient (Joao: col. 4, lines 6-10; col. 7, lines 16-23; col. 19, lines 8-11).

(T) As per claim 30, Joao discloses the system of claim 24, further comprising a system for allowing emergency personnel to view said patient's file (Joao: col. 12, lines 51-67; col. 13, lines 1-7).

(U) As per claim 31, Joao discloses the system of claim 24, further comprising a system for performing medical studies utilizing said group of patient files (Joao: col. 19, lines 21-53; Note that Examiner considers statistical calculations to be a form of medical study.).

(V) As per claim 32, Joao discloses a computerized method of clinically educating a physician over an electronic network, comprising the steps of:

- (i) interviewing a plurality of patients, each patient having one or more of a plurality of medical conditions (Joao: col. 19, lines 54-64);
- (ii) for each patient, generating a report in computerized form for said physician that includes condition-specific information regarding medical practices relating to said one or more medical conditions applicable to said patient (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1); and
- (iii) prior to each of said consultations, providing said physician with said condition-specific information in computerized form regarding medical practices relating to said one or more medical conditions (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1).

Claim Rejections - 35 USC § 103

4. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

5. Claim 7 is rejected under 35 U.S.C. 103(a) as being unpatentable over Joao as applied to claims 1-6, 8-13, 16, and 24-32 above, and further in view of Segal (6,754,655; hereinafter Segal).

(A) As per claim 7, Joao discloses the method of claim 6 wherein said step of electronically generating said pre-visit information further comprises electronically generating a pre-visit physician report (Joao: col. 17, lines 25-60; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1) that includes said key questions (Joao: col. 14, lines 13-21; col. 19, lines 54-64; col. 25, lines 25-38) and transmitting said pre-visit physician report to said physician (Joao: col. 17, lines 25-60; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1).

Joao, however, fails to expressly disclose a rationale for each of said questions. Nevertheless, including rationales for each of said questions is old and well known in the art, as evidenced by Segal.

In particular, Segal discloses a system and method that indicates rationales for doing a medical/diagnostic test (Segal: col. 12, lines 15-24). Note that Examiner considers diagnostic/medical tests to include a question or series of questions that are used to query a patient for the purpose of ascertaining their medical condition.

One of ordinary skill would have found it obvious at the time of the invention to include the aforementioned feature of Segal within the Joao system with the motivation of providing a means of learning about a certain healthcare topic (Joao: col. 7, lines 10-15) and evaluating the usefulness of a particular finding (Segal: col. 2, lines 29-30).

6. Claims 14, 15, 17-23 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao as applied to claim 1 above, and further in view of Ilif (5,935,060; hereinafter Ilif).

(A) As per claim 14, Joao fails to expressly disclose the method of claim 11, further comprising: supplying an access code associated with a patient to emergency personnel assigned to treat said patient; and utilizing said access code to connect to said server site and view said patient's file to assist in treating said patient. Nevertheless, these features are old and well known in the art, as evidenced by Ilif.

In particular, Ilif discloses the use of access codes to connect to a server site and view a patient's file (Ilif: col. 4, lines 66-67; col. 5, lines 1-2 and lines 51-67; col. 6, lines 1-18; Fig. 1-3a).

One of ordinary skill would have found it obvious at the time of the invention to include the aforementioned features of Ilif within the Joao system with the motivation of providing confidentiality and restricted access to sensitive medical information (Joao: col. 7, lines 16-23; col. 8-11).

(B) As per claim 15, Joao discloses the method of claim 11, further comprising, by said patient: viewing said patient's file (Joao: col. 19, lines 65-67; Fig. 1); and updating said patient's file (Joao: col. 19, lines 65-67; Fig. 1).

Joao, however, fails to expressly disclose the step of subsequently logging onto said server site. Nevertheless, this feature is old and well known in the art, as evidenced by Ilif.

In particular, Ilif discloses the step of logging onto a server (Ilif: col. 4, lines 5-7; col. 5, lines 51-67; Fig. 1-3a).

One of ordinary skill would have found it obvious at the time of the invention to include the aforementioned features of Ilif within the Joao system with the motivation of providing confidentiality and restricted access to sensitive medical information (Joao: col. 7, lines 16-23; col. 8-11).

(C) As per claim 17, Joao discloses a method for assisting a physician in providing medical services to a patient who has a medical condition, comprising:

- (i) providing a server site connected to an electronic communication network, said server site including storage of patient files for a plurality of patients including said patient (Joao: col. 8, lines 27-34; col. 13, lines 29-38; col. 15, lines 6-17; Fig. 1);
- (iv) conducting a pre-visit interview of said patient using electronically selected information including interactively interviewing said patient in preparation for a medical consultation, and responsive to said pre-visit interview, electronically storing responses of said patient in said patient's electronic file (Joao: col. 11, lines 3-13; col. 19, lines 54-64);

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- (v) responsive to said pre-visit interview, electronically generating a pre-visit summary that includes condition-specific preliminary information and transmitting said pre-visit summary to said patient (Joao: col. 4, lines 30-33; col. 11, lines 3-13; col. 20, lines 34-39; col. 24, lines 49-62; Fig. 1); and
- (vi) responsive to said pre-visit interview, electronically generating pre-visit information that includes a preliminary chart note and condition-specific educational material (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-8), and transmitting said pre-visit information to said physician (Joao: col. 12, lines 58-67 and col. 13, lines 1-7; col. 25, lines 54-58; Fig. 1).

Joao, however, fails to expressly disclose the steps of:

- (ii) providing a patient with access information for logging on to said server site; and
- (iii) logging onto said server site by said patient, and in response to a request by said patient, registering said patient including creating an electronic file for said patient in said patient record database.

Nevertheless, these features are old and well known in the art, as evidenced by Ilif.

In particular, Ilif discloses providing a patient with access information for logging onto a server site and logging onto said server site by said patient, and in response to a

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request by said patient, registering said patient including creating an electronic file for said patient in said patient record database (Ilif: col. 4, lines 66-67; col. 5, lines 1-2 and lines 51-67; col. 6, lines 1-18; Fig. 1-3a).

One of ordinary skill would have found it obvious at the time of the invention to include the aforementioned features of Ilif within the Joao system with the motivation of providing confidentiality and restricted access to sensitive medical information (Joao: col. 7, lines 16-23; col. 8-11).

(D) As per claim 18, Joao discloses the method of claim 17, further comprising protecting the security of all transmissions to and from said server site over said electronic communication network, including encrypting said transmissions, and further including protecting the privacy of said a patient's file on said server site (Joao: col. 4, lines 6-10; col. 7, lines 16-23; col. 19, lines 8-11).

(E) As per claim 19, Joao discloses the method of claim 17, further comprising the steps of providing a plurality of key questions to said patient with said pre-visit summary (Joao: col. 11, lines 3-13; col. 14, lines 13-21; col. 19, lines 54-64; col. 25, lines 25-38; Fig. 1), and supplying said plurality of pre-visit questions to said physician with said pre-visit information (Joao: col. 14, lines 13-21; col. 17, lines 25-60; col. 19, lines 54-64; col. 25, lines 25-38 and lines 54-58; col. 26, lines 10-38; Fig. 1).

(F) As per claim 20, Joao discloses the method of claim 17, further comprising:

- (i) examining said patient by said physician (Joao: col. 19, lines 65-67 and col. 20, lines 1-8; Fig. 1), and responsive to said examination, completing said patient's chart note by said physician and transmitting said completed chart note to said server site for storage in said patient's file (Joao: col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1);
 - (ii) responsive to said examination, electronically selecting condition-specific educational material to be provided to said patient (Joao: col. 11, lines 3-13; col. 17, lines 25-60; col. 25, lines 54-58; col. 26, lines 10-38; Fig. 1), and transmitting said selected material to said server site for storage in said patient's file (Joao: Fig. 1); and
 - (iii) responsive to said completed chart note and said selected material, electronically generating a post-visit report for said patient (Joao: col. 11, lines 3-13; col. 19, lines 65-67 and col. 20, lines 1-26; Fig. 1).
- (G) As per claim 21, Joao discloses the method of claim 17, further comprising, by said patient:
- (i) subsequently logging onto said server site (Joao: col. 19, lines 8-11; Fig. 1);
 - (ii) viewing said patient's file (Joao: col. 19, lines 65-67; Fig. 1); and
 - (iii) updating said patient's file (Joao: col. 19, lines 65-67; Fig. 1).

(H) As per claim 22, Joao discloses the method of claim 17, further comprising, by said physician:

- (i) subsequently logging onto said server site (Joao: col. 19, lines 8-11; Fig. 1); and
- (ii) viewing said patient's file unless said patient has previously updated said patient's file to de-select said physician (Joao: col. 19, lines 8-11 and lines 65-67; Fig. 1).

(I) As per claim 23, Joao discloses the method of claim 17, further comprising:

- (i) electronically storing a group of patient files without patient identifiers such that said patient files avoid disclosing the identity of the patients associated with said files (Joao: col. 5, lines 60-64; col. 7, lines 16-18); and
- (ii) performing medical studies utilizing said group of patient files (Joao: col. 19, lines 21-53; Note that Examiner considers statistical calculations to be a form of medical study.).

Conclusion

6. The prior art made of record and not relied upon is considered pertinent to Applicant's disclosure. The cited but not applied art teaches a user adaptable expert system (5,481,647); a method and system aiding medical diagnosis and treatment (5,974,124); an interactive method and system for managing physical exams, diagnosis and treatment protocols in a health care practice (6,047,259); a method and system for providing pre and post operative support and care (US2001/0021910); a patient care delivery system (6,302,844); an apparatus and method for processing and/or providing healthcare information and/or healthcare-related information (US2001/0032099); a health monitoring and diagnostic device and network-based health assessment and medical records maintenance system which utilizes encryption, among other technologies (6,602,469); and a method for production of medical records and other technical documents (6,684,188).

The cited but not applied prior art also includes non-patent literature articles by Wilbur D. Hagamen and Martin Gardy ("The Numeric Representation of Knowledge and Logic -- Two Artificial Intelligence Applications in Medical Education" 1986. IBM Systems Journal. Vol. 25, Iss. 2. p. 207, 29 pgs.); PR Newswire ("Accordant Health Services Pilots Comprehensive, Interactive Web Site for Patients with Chronic Disease" Oct. 19, 1999. pg. 1.); and John Barnett ("MCC Envisions Diagnosis by Computer" Feb. 16, 1987. Houston Chronicle. pg. 1.).


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Any inquiry concerning this communication or earlier communications from the examiner should be directed to Mike Tomaszewski whose telephone number is (571)272-8117. The examiner can normally be reached on M-F 7:00 am - 3:30 pm.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571)272-6776. The fax phone number for the organization where this application or proceeding is assigned is 703-872-9306.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).

MT ~~MT~~ 6.17.05


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